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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/661,406
Filing Date	September 12, 2003
First Named Inventor	Patrick P. Wu
Art Unit	3731
Examiner Name	Elizabeth Houston
Attorney Docket Number	ENDOS-64190 (4082P)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1449 Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	CUSTOMER NO. 24201	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	FULWIDER PATTON LLP		
Signature			
Printed name	THOMAS H. MAJCHER		
Date	SEPTEMBER 28, 2006	Reg. No.	31,119

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the

Signature	
Typed or printed name	THOMAS H. MAJCHER
Date	SEPTEMBER 28, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Docket Code:

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PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2006

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
\$180.00**Complete if Known**

Application Number	10/661,406
Filing Date	September 12, 2003
First Named Inventor	Patrick P. Wu
Examiner Name	Elizabeth Houston
Art Unit	3731
Attorney Docket No.	ENDOS-64190 (4082P)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Deposit Account Number: 06-2425 Deposit Account Name: FULWIDER PATTON LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or any underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid(\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

<u>Fee Description</u>	<u>Small Entity</u>
	50
	25
	200
	100
	360
	180

Each independent claim over 3 (including Reissues)

Multiple Dependent Claims

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	\$50.00	= \$0.00			

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	\$200.00	= \$0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	0	/ 50 0 (round up to a whole)	x \$250.00 = \$0.00	

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supp IDS

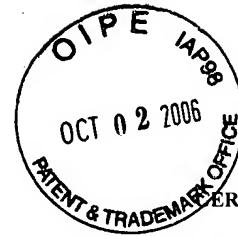
\$180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	31,119	Telephone	310 824 5555
Name (Print/Type)	THOMAS H. MAJCHER		Date	09/28/06	

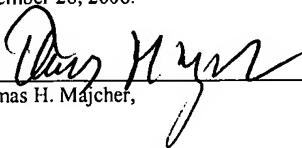
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CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

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Thomas H. Majcher,

Reg. No. 31,119

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/661,406	Confirmation No.: 6647
Applicant	:	Patrick P. Wu	
Filed	:	September 12, 2003	
Art Unit	:	3731	
Examiner	:	Elizabeth Houston	
Title	:	DELIVERY SYSTEM FOR MEDICAL DEVICES	
Docket No.:	:	ENDOS-64190 (4082P)	September 28, 2006
Customer No.	:	24201	Los Angeles, California

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Dear Sir:

Pursuant to the duty of disclosure and 37 CFR § 1.97(c)(2), enclosed is Form PTO 1449, listing references which may be material to the patentability of the invention. The Examiner is respectfully requested to consider and cite the references. It is additionally requested that the Examiner indicate consideration of the cited references by returning a copy of the attached form PTO 1449 with initials and/or other appropriate marks.

10/03/2006 SSESHE1 00000013 10661406

01 FC:1806

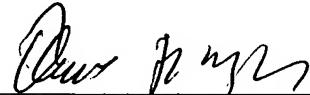
180.00 OP

This statement is not a representation that all of the information cited is necessarily effective as prior art against the present application or that a prior art search was performed.

This Information Disclosure Statement is being submitted pursuant to 37 CFR 1.97(c) and the requisite fee of \$180.00 is enclosed. If any additional fees are due, the Commissioner is authorized to charge any these fee(s) to our Deposit Account No. 06-2425. A duplicate of this paper is enclosed.

Respectfully submitted,

FULWIDER PATTON LLP

By: 
THOMAS H. MAJCHER
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Customer No. 24201



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Respectfully submitted,

FULWIDER PATTON LLP

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*S*ubstitute for form 1449A/PTC

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 1 Attorney Docket Number ENDOS-64190 (4082P)

Examiner Name	Elizabeth Houston
Attorney Docket Number	ENDOS-64190 (4082P)

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature _____ **Date Considered** _____
 *EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO, Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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